



BUILDING PERMIT APPLICATION
BUILDING DIVISION/COMMUNITY DEVELOPMENT DEPARTMENT

BS _____

MULTI-FAMILY DWELLING

THIS IS A PERMIT APPLICATION ONLY. WORK IS NOT AUTHORIZED UNTIL FEES HAVE BEEN PAID AND A BUILDING PERMIT HAS BEEN ISSUED.

ADDRESS		CONSTRUCTION VALUATION \$		SQUARE FOOTAGE	DATE
DESCRIPTION					
OWNER		APPLICANT/ CONTACT		CONTRACTOR	
ADDRESS		ADDRESS		ADDRESS	
CITY/ STATE/ ZIP		CITY/ STATE/ ZIP		CITY/ STATE/ ZIP	
PHONE	CELL PHONE	PHONE	CELL PHONE	PHONE	CELL PHONE
E-MAIL		E-MAIL	LICENSE	E-MAIL	LICENSE
PRE-SUBMITTAL ZONING REVIEW: PRELIMINARY REVIEW ONLY – NOT AN APPROVAL		ZONE	OK FOR PLAN CHECK: <input type="checkbox"/> YES <input type="checkbox"/> NO	BY:	DATE:
COMMENTS					

✓ PROJECT TYPE	✓ STRUCTURE TYPE	✓ OTHER PERMITS	✓ ROOFING
NEW	APARTMENT	WINDOW REPLACEMENT	AREA:
FOUNDATION ONLY	CONDOMINIUM	# OF WINDOWS:	SF
ADDITION & REMODEL	GARAGE & ACCESSORY BLDG	# OF BEDROOM WINDOWS	TEAR OFF WITH NEW SHEATHING
ADDITION ONLY	GARAGE ONLY		CLASS 'A' COMP
REMODEL ONLY	ACCESSORY BUILDING	SANDBLAST	CLASS 'A' BUILT-UP
SITE IMPROVEMENTS	✓ GRADING & SHORING	# OF STRUCTURES:	OTHER:
SEISMIC RETROFIT	GRADING		TEAR OFF- NEW ROOF COVERING ONLY
FIRE DAMAGE REPAIR	TOTAL CUT & FILL	OTHER DESCRIPTION	NEW CLASS 'A' COMP
DEMOLITION	CY		NEW CLASS 'A' BUILT-UP
CONDO CONVERSION	SHORING		OTHER:
	BOND:		OVERLAY ROOFING
	LIABILITY INSURANCE		COMP SHINGLES ONLY
	POLICY #:		1-LAYER EXISTING
	EXP. DATE:		BUILT-UP ONLY
	OSHA PERMIT #:		1-LAYER EXISTING

FIRE DEPT.	BWP/ WATER	BWP/ ELECT	PUBLIC WORKS DEPT.	
PLAN CHECK: <input type="checkbox"/> YES <input type="checkbox"/> NO	FEE REQ'D: <input type="checkbox"/> YES <input type="checkbox"/> NO	FEE REQ'D: <input type="checkbox"/> YES <input type="checkbox"/> NO	SEWER AVAILABLE: <input type="checkbox"/> YES <input type="checkbox"/> NO	STREET IMPROVEMENT INSPECTION
PLAN CHECK FEE: _____	FEE PAID: _____	FEE PAID: _____	CONNECTION CHARGE: _____	PERMIT NO. _____
DATE: _____ BY: _____	DATE: _____ BY: _____	DATE: _____ BY: _____	DATE PAID: _____ BY: _____	CURB CUT WIDTH: _____
PARKS/REC.	PW/SEWER		ADDRESS APPROVED:	RECURB (E) CURB CUT: <input type="checkbox"/> YES <input type="checkbox"/> NO
	INTERCEPTOR REQUIRED:	BACKFLOW PREVENTION:	PEDESTRIAN PROTECTION REQ'D:	BY: _____
APPROVED BY: _____	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> FENCE <input type="checkbox"/> CANOPY <input type="checkbox"/> NONE	SITE PLAN CHECKED FOR EASEMENTS
DATE: _____	DATE: _____ BY: _____	DATE: _____ BY: _____	BY: _____	BY: _____
			SETBACK FOR STREET WIDENING:	PUBLIC WORKS DEPARTMENT REQ'D NOTED:
			BY: _____	CHECK SHEET: <input type="checkbox"/> YES <input type="checkbox"/> NO
				BY: _____

PLANNING DIVISION (PLANNING APPROVAL GIVEN ONLY AFTER ALL OF THE ABOVE APPROVALS ARE OBTAINED)

ZONE	PROJECT NO.	ENTITLEMENT DATE	BY:	COMMENTS
APPROVED BY:	DATE:	FEE:		

I DECLARE THAT THE FOLLOWING STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND THAT INFORMATION STATED HEREON IS TRUE. I AGREE TO COMPLY WITH ALL ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION. I UNDERSTAND AND AGREE THAT SHOULD I FAIL TO COMPLY WITH THE ABOVE, ALL PERMITS SHALL BE DEEMED REVOKED.

SIGNED: _____ DATE: _____ SIGNATURE OF APPLICANT: _____ SIGNATURE: _____